



Rev. 02/01/00

CONTINUED PROSECUTION APPLICATION (CPA) REQUEST TRANSMITTAL Submit an original, and a duplicate for fee processing.

(Only for Continuation or Divisional application s under 37 C.F.R. § 1.53(d))							
	CHECK BOX, if						
	PA tant Commissioner for Patents ington, DC 20231						
Attomey Docket No.: Of Prior Application First Named Inventor:	DAVIS100 DAVIS100 Jeffrey Davis		TC 376				
Examiner Name: Group/Art Unit:	Solak 3746		RECEIVEI				
Express Mail Label No.:	EJ740154225US		VED 2000 IL ROOM				
	□ continuation or □ divisional application under 37 (application (CPA)) of prior application entitled METHOD AND APPARATU	on number 09/334,208,	PING UNIT.				
under 37 C.F.R. 2. A response to th 3. This application is file	ered amendment previously filed on § 1.116 in the prior nonprovisional are final rejection dated August 28, 20 and by fewer than all the inventors nare the following inventor(s) named in the following inventor(s) named in the following inventor(s)	000, is attached. med in the prior application, 37 C					
b. The inventor(s) to be deleted are set forth on a separate sheet attached hereto. A new power of attorney or authorization of agent (PTO/SB/81) is enclosed.							
5. Information Disclosure Statement (IDS) is enclosed: a. PTO-1449 b. Copies of IDS Citations 11/07/2000 YP0LITE1 00000020 09334208 01 FC:231 355.00 0P							

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 C.F.R. § 1.16 (c) or (j))	-20* =		X \$ =	\$
	INDEPENDENT CLAIMS (37 C.F.R. § 1.16 (b) or (i))	-3**=		X \$ =	
	MULTIPLE DEPENDENT	CLAIMS (if applicable) (Note 3	7 C.F.R. § 1.16 (d))	+\$ =	
				BASIC FEE (37 C.F.R. § 1.16	710
	A 184 184 184			ove Calculations =	-0-
1	Reduction by 50% for filing * Reissue claims in excess of 20 and	by small entity (Note 37 C.F	F.R. §§ 1.9, 1.27, 1.28).	<u> </u>	355
- 25 6	** Reissue independent claims over	original patent.		TOTAL=	
b.	and desired. is no longer claimed. commissioner is hereby th No. 12-2150: Fees required under 3 Fees required under 3 Fees required under 3 theck in the amount of 3 w Attorney Docket Number Receipt For Facsimile T Return Receipt Postcard ter:	authorized to credit 7 C.F.R. § 1.16 (fee 7 C.F.R. § 1.17 (Ext 7 C.F.R. § 1.18 (Issu 355 is enclosed. The property of this CPA unless fransmitted CPA d (should be specifically itemized	overpayments or chas). ension fees). ue fees). a new Attorney Docket Number ha	oplication and so	uch status is still proper
NOTE:	The prior application's UNLESS a new corres	correspondence address spondence address is pro	s will carry over to this CP	A	
12. Signatu	re of Attorney	address is pro	TIGOU DEIOW.		
Name (Print/ Signature: Address:		Wilson er Blvd. mos, New Mexico	87544		RECEIN NOV -9 TC 3700 MA
Registration Date: Nみ.	No.: 28,351				RECEIVED NOV -9 2000 3700 MAIL ROOM